## PATENT APPLICATION FEE DETERMINATION RECORD

	,,,,,	Effectiv	re October	1, 20	000						······································		
	(	CLAIMS AS	FILED - P		(Colum	n 2)	SMALL TYPE	ENT		OR	OTHER		
TOTAL CLAIMS					623 (San	द्वित्र के दिन्द	RAT		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	37000	OR	ASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			minus 20=				XS 9	=		OR	X\$18=	•	
INDEPENDENT CLAIMS			minu	ıs 3 =			X40	=		OR	X80=		
MUL	TIPLE DEPEND	ENT CLAIM PR	RESENT				+135	5=		OR	+270=		
• If t	he difference i	n column 1 is le	ess than zer	o, ente	er "0" in co	olumn 2	TOT	AL		OR	TOTAL		
	CLAIMS AS AMENDED - PART II (Cotumn 1) (Cotumn 2) (Cotumn 3)							OTHER T SMALL ENTITY OR SMALL EN					
VT A		CLAIMS REMAINING AFTER		NUI PREV	HEST MBER HOUSLY DIFOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEÆ	
AMENDMENT	Total	· 4A	Minus	·. <b>/</b>	D	=	X\$ 9	9=		OR	X\$18=		
MEN	Independent	. 13	Minus	•••	3	=	×2	<b>9</b> =		OR	XB0=		
	FIRST PRESE	NTATION OF MU					+13	5=	/	OR	+270=	\/	
		JULI AVAILABLE COPY						TAL FEE		OR	TOTAL ADDIT, FEE	V	
1		(Column 1)		(Col	lumn 2)	(Column 3)	ـــــــ ا			<b>,</b>	· · · · · · · · · · · · · · · · · · ·	T	
1 m 1 m		CLAIMS REMAINING AFTER		NI PRE	GHEST JMBER VIOUSLY JD FOR	PRESENT EXTRA	FA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	AMENDMENT	Minus	44		=	X\$	9=		OR	′X\$18=		
AMENDMENT	Independent	•	Minus	***		=		8=	<u></u>	OR	X80=		
	FIRST PRESENTATION OF MOETH LE DET EXTREME						+13	15-		OR			
	LEST AVAILABLE COPY							OTAL FEE		OR	TOTA ADDIT. FE		
		(Column 1)		(Co	olumn 2)	(Column 3)			_		,		
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		CLAIMS REMAINING AFTER		PRI	IGHEST LUMBER EVIOUSLY AID FOR	PRESENT EXTRA	RA	ΛTE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONA FEE	
TNEMONDARA	Total	AMENDMENT	Minus	1		=	X	9=		OR	X\$18=		
	Independent	1.	Minus			=	$\frac{1}{x}$	18=		OF	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					м 🗍	┚┝╌		<del> </del>	1	070		
	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.							35=		OF	101		
	" If the "Highest N	lumber Previously	Paid For IN II	HIS 514	CE is less u	han 3 enter "3"	O. ADDI	TOTAL T. FEE	: L	JOF	ADDIT. FE	E	
	"If the "Highest I	Number Previously Ember Previously	r Haid For IN I Paid For (Total	or Inde	pendent) is t	he highest num	ber lound is	n the a	ppropriate	box in	column 1.	?	

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE		or Or	OTHER THAN OR SMALL ENTITY		
FO	R	NUMBE	RFILED	NUMBER E	XTRA	Γ	RATE	FEE		RATE	FEE
ВА	SIC FEE			·				345.00	OR	Š.,	690.00
то	TAL CLAIMS	40.	minus 20=	· 20			X\$ 9=		OR	X\$18=	300
IND	EPENDENT CLA	ums 3	minus 3 =		Ţ	X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT							+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	1050,00
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL E	ENTITY	OR	OTHER SMALL	
ENT A	artika di kacamatan di kacamatan Karamatan di kacamatan di kacama	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MQI	Total	*	Minus *	*	=		X\$ 9=		OR	X\$18=	
<b>AMENDMENT</b>	Independent	*		***	=		X39=		OR	X78=	
_	FIRST PRESE	NTATION OF MU	ILTIPLE DEPE	ARIF (	COPY		+130=		OR	+260=	
BEST AVAILABLE COPY							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
			0011.122								
ENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
	Independent	*		***	=		X39=		OR	X78=	
F	FIRST PRESE		<b>'</b>	+130=		OR	+260=				
DEST AVAILABLE COPY							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Column 2)	(Column 3)				_		
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**	=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	=	<b> </b>	X39=		OR	X78=	, :
F	FIRST PRESE	NTATION OF M	ULTIPLE DEPE	NDENT CLAIN	1	<u> </u>	+130=		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											